

DATE ALLOWED: February 27, 2006

**OBLON** 

Try 2665

SPIVAK

**McClelland** 

MAIER

NEUSTADT

P.C.

ALEXANDRIA, VIRGINIA 22313

Docket No.: 215208US2S PCT

ATTORNEYS AT LAW

ECKHARD H. KUESTERS (703) 413-3000 EKUESTERS@OBLON.COM

RE: Application Serial No.: 09/926,450

Inventor:

Koichi ITO, et al.

Filing Date: November 6, 2001

For:

COMMUNICATION DEVICE WHICH REQUESTS TRANSMISSION

OF ENCODED DATA BASED ON MONITORED RECEPTION

**QUALITY** 

Group

2665

Examiner:

MATTIS, JASON E.

SIR:

Attached hereto for filing are the following papers:

### Request to Correct Ninth Inventor's Name and Title **Application Data Sheet (6 pages)**

Our credit card payment form in the amount of \$0.00 is attached covering any required fees. In the event any variance exists between the amount enclosed and the Patent Office charges for filing the above-noted documents, including any fees required under 37 C.F.R 1.136 for any necessary Extension of Time to make the filing of the attached documents timely, please charge or credit the difference to our Deposit Account No. 15-0030. Further, if these papers are not considered timely filed, then a petition is hereby made under 37 C.F.R. 1.136 for the necessary extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

OBLON, SPIVAK, McCLELLAND,

MATER & NEUSTADT, P.C.

Eckhard H. Kuesters

Registration No. 28,870

**Customer Number** 

22850

(703) 413-3000 (phone) (703) 413-2220 (fax) (OSMMN 01/2005)

EHK/TY/msh

I:\ATTY\TY\AMEND-RESPONSES\215208\215208US REQ COR DEC&TITLE CV LTR.DOC

DOCKET NO: 215208US2S PCT

### IN THE UNITED STATES PATENT & TRADEMARK OFFICE

N RE APPLICATION OF : DATE ALLOWED: FEBRUARY 27, 2006

KOICHI ITO, ET AL. : EXAMINER: MATTIS, JASON E.

SERIAL NO: 09/926,450

FILED: NOVEMBER 6, 2001 : GROUP ART UNIT: 2665

FOR: COMMUNICATION DEVICE WHICH REQUESTS TRANSMISSION OF ENCODED DATA BASED ON MONITORED RECEPTION QUALITY

#### REQUEST TO CORRECT NINTH INVENTOR'S NAME AND TITLE

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

SIR:

In the above-identified patent application, Applicants hereby request correction of the Patent Office records to read the ninth inventor's name and title as follows:

Ninth Inventor's Name: Hiroshi OGASAWARA

Title: COMMUNICATION DEVICE WHICH REQUESTS TRANSMISSION OF ENCODED DATA BASED ON MONITORED RECEPTION QUALITY

In the above-identified patent application, there was a typographical error in the declaration and the assignment, filed November 6, 2001, and a Notice of Allowance, mailed February 27, 2006. The declaration and the assignment were both signed correctly by the ninth inventor.

Application No. 09/926,450

Date Allowed: February 27, 2006

## An Application Data Sheet is attached herewith.

Respectfully submitted,

OBLON, SRIVAK, McCLELLAND,

MAIER & NEUSTADT, P.C.

Customer Number

22850

Tel: (703) 413-3000 Fax: (703) 413 -2220 (OSMMN 06/04) Eckhard H. Kuesters Attorney of Record

Registration No. 28,870

EHK/TY/msh

1:\atty\TY\AMEND-RESPONSES\215208\215208US Req cor dec&title.doc



#### APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Number:: 09/926,450
Application Date:: 11/06/01
Application Type:: REGULAR

Subject Matter:: UTILITY CD-ROM or CD-R?:: NONE

Title:: COMMUNICATION DEVICE WHICH

REQUESTS TRANSMISSION OF ENCODED DATA BASED ON

MONITORED RECEPTION QUALITY

Attorney Docket Number:: 215208US2SPCT

#### INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: Japan

Status:: FULL CAPACITY

Given Name:: Koichi

Family Name:: Ito

City of Residence:: Hino-shi
State or Province of Residence:: Tokyo

Country of Residence:: Japan

Street of Mailing Address:: 18-18 Nishihirayama 3-chome

City of Mailing Address:: Hino-shi
State or Province of Mailing Address:: Tokyo

State or Province of Mailing Address:: Tokyo Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 191-0055

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: Japan

Status:: FULL CAPACITY

Given Name:: Kentoku
Family Name:: Yamaguchi
City of Residence:: Hachioji-shi

State or Province of Residence:: Tokyo
Country of Residence:: Japan

Street of Mailing Address:: 1-32-6-503, Bessho

City of Mailing Address:: Hachioji-shi

State or Province of Mailing Address:: Tokyo Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 192-0363

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: Japan

Status:: FULL CAPACITY
Given Name:: Nobuhiro

Family Name:: Inoue
City of Residence:: Hachioji-shi

State or Province of Residence:: Tokyo
Country of Residence:: Japan

Street of Mailing Address:: 1821-1, Kobikimachi

City of Mailing Address:: Hachioji-shi

State or Province of Mailing Address:: Tokyo
Country of Mailing Address:: Japan
Partal or Zin Code of Mailing Address:: 103,003

Postal or Zip Code of Mailing Address:: 193-0934

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name:: Family Name::

City of Residence:: State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address:: Country of Mailing Address::

Postal or Zip Code of Mailing Address::

**Applicant Authority Type:**: Primary Citizenship Country::

Status::

Given Name::

Family Name:: City of Residence::

State or Province of Residence::

Country of Residence::

**Street of Mailing Address::** 

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

**INVENTOR** 

Japan ·

**FULL CAPACITY** 

Yuichi

Sato

Ota-ku

Tokyo Japan

28-1, Sanno 1-chome

Ota-ku

Tokyo

Japan

143-0023

INVENTOR

Japan

**FULL CAPACITY** 

Kei

Sakuma

Hachioji-shi

Tokyo

Japan

16-17, Owadamachi 5-chome

Hachioji-shi

Tokyo

Japan

192-0045

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name:: Family Name::

City of Residence::
State or Province of Residence::

Country of Residence::

Street of Mailing Address::

Street of Mailing Address..

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Primary Citizenship Country::

Status::

Given Name:: Family Name::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address:: Country of Mailing Address::

Postal or Zip Code of Mailing Address::

**INVENTOR** 

Japan

**FULL CAPACITY** 

Seiji

Oura

Kawasaki-shi

Kanagawa

Japan

106, Fuji Heights, 3144, Noborito, Tama-

ΚU

Kawasaki-shi

Kanagawa

Japan

214-0014

**INVENTOR** 

Japan

**FULL CAPACITY** 

Tomeo

Oka

Yokohama-shi

Kanagawa

Japan

1F, Ota-so, 151, Nishinoyacho, Naka-ku

Yokohama-shi

Kanagawa

Japan

231-0844

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: Japan

Status:: FULL CAPACITY

Given Name:: Yoshihiro Family Name:: Kataoka

City of Residence:: Setagaya-ku

State or Province of Residence:: Tokyo Country of Residence:: Japan

Street of Mailing Address:: 24-3-602 Daizawa 1-chome

City of Mailing Address:: Setagaya-ku

State or Province of Mailing Address:: Tokyo Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 155-0032

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: Japan

Status:: FULL CAPACITY

Given Name:: Hiroshi
Family Name:: Ogasawara

City of Residence: Sagamihara-shi

State or Province of Residence:: Kanagawa

Country of Residence:: Japan

Street of Mailing Address:: 14-8, Aihara 3-chome

City of Mailing Address:: Sagamihara-shi

State or Province of Mailing Address:: Kanagawa Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 229-1101

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP01/01739	03/06/01

## FUKEIGIN PRIURITT INFURIVIATIUN

Application Number:	Country::	Filing Date::	Priority Claimed::
2000-061213	Japan	03/06/00	YES

# **ASSIGNMENT INFORMATION**